



PHILIP L. BROWNING
Director

**County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES**

425 Shatto Place, Los Angeles, California 90020
(213) 351-5602

July 10, 2012

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To: Supervisor Zev Yaroslavsky, Chairman
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From: Philip L. Browning
Director

A handwritten signature in blue ink, appearing to be "P. Browning", written over the printed name and title.

**WEST COVINA FOSTER FAMILY AGENCY dba HOMES OF HOPE,
INCORPORATED, CASA ESPERANZA TREATMENT CENTER GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW**

The Out-of-Home Care Management Division (OHCMD) conducted a review of West Covina Foster Family Agency dba Homes of Hope, Incorporated, Casa Esperanza Treatment Center Group Home (Casa Esperanza) in March 2012, at which time the group home had one six-bed site. There were six female placed DCFS children. The placed children's overall average length of placement was eight months, and the average age was 17.

Casa Esperanza is located in the First Supervisorial District and provides services to Los Angeles County Department of Children and Family Services' (DCFS) foster youth. According to Casa Esperanza's program statement, its stated goal is "to provide quality residential foster care to minors who are unable to live with their families and instill hope, trust, joy and meaning in the lives of minors in their care." Casa Esperanza is licensed to serve a capacity of six females, ages 13 through 17.

For the purpose of this review, four of six currently placed children's case files were reviewed, and all four children were interviewed. Two children were placed at the Casa Esperanza for less than 30 days; their files were not reviewed and they were not

interviewed. Three discharged children's case files were reviewed to determine if the destination of placement was per their permanency plan and if the children were meeting their Needs and Services Plan (NSP) goals at time of discharge. Three staff files were reviewed for compliance with Title 22 Regulations and County contract requirements.

All four sampled children were prescribed psychotropic medication. We reviewed their case files to assess timeliness of Psychotropic Medication Authorizations (PMAs) and to confirm that documentation of psychiatric monitoring was maintained as required.

SCOPE OF REVIEW

The purpose of this review was to assess Casa Esperanza's compliance with the County contract and State regulations. The visit included a review of Casa Esperanza's program statement, administrative internal policies and procedures, four current and three discharged children's case files, and a random sampling of personnel files. A visit was made to the site to assess the quality of care and supervision provided to the children. We conducted interviews with the children to assess the care and services they were receiving.

A copy of this report has been sent to the Auditor-Controller (A-C) and Community Care Licensing (CCL).

SUMMARY

Generally, the children interviewed reported feeling safe at Casa Esperanza, and that they were provided with good care and appropriate services. They further reported being comfortable in their environment and were treated with respect and dignity.

Deficiencies were noted during the monitoring review. It was noted that one initial NSP was not comprehensive; one child was not provided a mentor; one child was not given opportunities to participate in age-appropriate extra-curricular, enrichment, and social activities in which they have an interest; and one child disclosed that consequences were not fair.

Casa Esperanza was receptive to implementing systemic changes to improve compliance with the regulation and the contract. The Executive Director and staff were accessible and cooperative and agreed to address noted deficiencies in a Corrective Action Plan (CAP).

NOTABLE FINDINGS

The following are the notable findings of our review:

- One initial NSP was not comprehensive and did not meet all the required elements in accordance with the NSP template. The NSP did not include the date of the PMA, and no explanation was documented in the NSP why the PMA date was not included. The Administrator stated that the child was placed with medication but without the PMA. Casa Esperanza eventually obtained the PMA, after the due date of the child's initial NSP. Subsequent NSPs included the PMA date.
- One child disclosed that she wanted a mentor, however one was not provided by Casa Esperanza. The Administrator stated the child never asked Casa Esperanza staff for a mentor and if she had asked, one would have been provided. After the Exit Conference, the child's therapist was notified. The child will obtain a mentor through another agency with whom Casa Esperanza partners.
- One of four children interviewed reported that consequences were not fair. She stated some staff members show favoritism toward certain residents. She told the Monitor about an incident when two girls, whom she referred to as the "favorites" had run away. She claimed the girls were never disciplined when they returned. For other residents, this would have resulted in the reduction of daily points. The points determine privileges and weekly allowance, above the base allowance, the children receive; the more points they have, the more opportunities they have to participate in recreational activities and the more money they receive. The Administrator stated that consequences and the guidelines for administering consequences are fair. The DCFS Monitor reviewed Casa Esperanza's discipline policy and found it to be fair. Further, all the other children interviewed reported the consequences were fair. Nevertheless, this child felt that some group home staff members were not fair when administering consequences, and thus her comments could not be negated.
- Casa Esperanza did not provide a child the opportunity to participate in age-appropriate extra-curricular, enrichment, and social activities in which she has an interest. The child disclosed that she wanted to participate in kickboxing but was not permitted. The Administrator stated that Casa Esperanza staff were trying to find a kickboxing class close to the group home with a schedule that did not interfere with the child's mandatory drug treatment schedule. Since the review, the child has been enrolled in her kickboxing classes which she attends four times a week.

A detailed report of our findings is attached.

EXIT CONFERENCE

The following are highlights from the Exit Conference held April 18, 2012.

In attendance:

Sukhwinder Singh, Executive Director; Valerie Roth, Administrator/Social Worker; Neetu Chhokar, Facility Manager, Casa Esperanza; and Kirk Barrow, Monitor DCFS, OHCMD.

Highlights:

The Administrator stated that although she disagreed with some of the findings, the review was helpful and the deficiencies noted have been corrected.

Casa Esperanza provided an approved written Corrective Action Plan (CAP) addressing each recommendation noted in the compliance report. The approved CAP is attached.

We will assess for full implementation of recommendations during our next review.

If you have any questions, please call me or your staff may contact Aldo Marin, Board Relations Manager, at (213) 351-5530.

PLB:RS:KR:
EAH:PBG:kb

Attachments

c: William T Fujioka, Chief Executive Officer
Wendy Watanabe, Auditor-Controller
Jerry E. Powers, Chief Probation Officer
Public Information Office
Audit Committee
Sybil Brand Commission
Emmanuel Azahriah, President, Board of Directors, Homes of Hope, Incorporated
Sukhwinder Singh, Executive Director, Homes of Hope, Incorporated
Jean Chen, Regional Manager, Community Care Licensing
Lenora Scott, Regional Manager, Community Care Licensing

**WEST COVINA FFA dba HOMES OF HOPE, INCORPORATED
CASA ESPERANZA TREATMENT CENTER GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW**

**1568 McLeod Place, Pomona, CA 91768
License Number 197804217
Rate Classification Level 11**

	Contract Compliance Monitoring Review	Findings: March 2012
I	<u>Licensure/Contract Requirements</u> (9 Elements) <ol style="list-style-type: none"> 1. Timely Notification for Child's Relocation 2. Transportation 3. SIRs 4. Compliance with Licensed Capacity 5. Disaster Drills Conducted & Logs Maintained 6. Runaway Procedures 7. Allowance Logs 8. CCL Citations/OHCMD Investigation Reports on Safety/Plant Deficiencies 9. Detailed Sign In/Out Logs for placed children 	Full Compliance (ALL)
II	<u>Facility and Environment</u> (6 Elements) <ol style="list-style-type: none"> 1. Exterior Well Maintained 2. Common Areas Maintained 3. Children's Bedrooms/Interior Maintained 4. Sufficient Recreational Equipment 5. Sufficient Educational Resources 6. Adequate Perishable and Non-Perishable Food 	<ol style="list-style-type: none"> 1. Improvement Needed 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance

III	<u>Maintenance of Required Documentation and Service Delivery</u> (13 Elements) <ol style="list-style-type: none"> 1. Child Population Consistent with Program Statement 2. DCFS CSW Authorization to Implement NSPs 3. Children's Participation in the Development of NSPs 4. NSPs Implemented and Discussed with Staff 5. Children Progressing Toward Meeting NSP Case Goals 6. Development of Timely Initial NSPs 7. Development of Comprehensive Initial NSPs 8. Therapeutic Services Received 9. Recommended Assessment/Evaluations Implemented 10. DCFS CSWs Monthly Contacts Documented 11. Children Assisted in Maintaining Important Relationships 12. Development of Timely Updated NSPs 13. Development of Comprehensive Updated NSPs 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Improvement Needed 8. Full Compliance 9. Full Compliance 10. Full Compliance 11. Improvement Needed 12. Full Compliance 13. Full Compliance
IV	<u>Education and Workforce Readiness</u> (8 Elements) <ol style="list-style-type: none"> 1. Children Enrolled in School Timely 2. Children Attending School 3. GH Facilitates in Meeting Child's Educational Goals 4. Children's Academic or Attendance Increase 5. Current IEPs Maintained 6. Current Report Cards Maintained 7. YDS/Vocational Programs Opportunities Provided 8. GH Encourages Children's Participation in YDS 	Full Compliance (ALL)
V	<u>Health And Medical Needs</u> (6 Elements) <ol style="list-style-type: none"> 1. Initial Medical Exams Conducted 2. Initial Medical Exams Timely 3. Follow-Up Medical Exams Timely 4. Initial Dental Exams Conducted 5. Initial Dental Exams Timely 6. Follow-Up Dental Exams Timely 	Full Compliance (ALL)
VI	<u>Psychotropic Medication</u> (2 Elements) <ol style="list-style-type: none"> 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review 	Full Compliance (ALL)

VII	<p><u>Personal Rights And Social/Emotional Well-Being</u> (15 Elements)</p> <ol style="list-style-type: none"> 1. Children Informed of Home's Policies and Procedures 2. Children Feel Safe 3. Satisfaction with Meals and Snacks 4. Staff Treatment of Children with Respect and Dignity 5. Appropriate Rewards and Discipline System 6. Fair Consequences 7. Children Allowed Private Visits, Calls and Correspondence 8. Children Free to Attend Religious Services/Activities 9. Reasonable Chores 10. Children Informed About Their Medication 11. Children Aware of Right to Refuse Medication 12. Children Free to Receive or Reject Voluntary Medical, Dental and Psychiatric Care 13. Children Given Opportunities to Plan Activities 14. Children Participate in Activities (GH, School, Community) 15. Children's Given Opportunities to Participate in Extra-Curricular, Enrichment and Social Activities 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Improvement Needed 7. Full Compliance 8. Full Compliance 9. Full Compliance 10. Full Compliance 11. Full Compliance 12. Full Compliance 13. Full Compliance 14. Full Compliance 15. Improvement Needed
VIII	<p><u>Personal Needs/Survival And Economic Well-Being</u> (8 Elements)</p> <ol style="list-style-type: none"> 1. \$50 Clothing Allowance 2. Adequate Quantity of Clothing Inventory 3. Adequate Quality of Clothing Inventory 4. Involvement in Selection of Clothing 5. Provision of Ethnic Personal Care Items 6. Minimum Monetary Allowances 7. Management of Allowance/Earnings 8. Encouragement and Assistance with Life Book/Photo Album 	Full Compliance (ALL)
IX	<p><u>Discharged Children</u> (3 Elements)</p> <ol style="list-style-type: none"> 1. Children Discharged According to Permanency Plan 2. Children Making Progress Toward NSP Goals 3. Attempts to Stabilize Children's Placement 	Full Compliance (ALL)

X	<u>Personnel Records (including Staff Qualifications, Staffing Ratios, Criminal Clearances and Training)</u> (14 Elements) <ol style="list-style-type: none">1. DOJ Submitted Timely2. FBI Submitted Timely3. CACIs Timely Submitted4. Signed Criminal Background Statement Timely5. Education/Experience Requirement6. Employee Health Screening Timely7. Valid Driver's License8. Signed Copies of GH Policies and Procedures9. Initial Training Documentation10. One-Hour Child Abuse and Reporting Training11. CPR Training Documentation12. First-Aid Training Documentation13. Ongoing Training Documentation14. Emergency Intervention Training Documentation	Full Compliance (ALL)
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**WEST COVINA FFA dba HOMES OF HOPE, INCORPORATED,
CASA ESPERANZA TREATMENT CENTER GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW**

**1568 McLeod Place, Pomona, CA 91768
License Number 197804217
Rate Classification Level 11**

The following report is based on a "point in time" monitoring visit and addresses findings during the March 2012 monitoring review.

CONTRACTUAL COMPLIANCE

Based on our review, Casa Esperanza complied with seven of 10 sections of our contract compliance review: Licensure/Contract Requirements; Education and Workforce Readiness; Health and Medical Needs; Psychotropic Medication; Personal Needs/Survival and Economic Well-Being; Discharged Children; and Personnel Records. The following report details the results of our review.

FACILITY AND ENVIRONMENT

Based on our review of documentation from the provider and a walk-through of the facility, Casa Esperanza fully complied with five of six elements reviewed in the area of Facility and Environment.

The front door bell was not working at the time of the facility inspection. The Administrator stated that the door bell was repaired shortly after it was brought to their attention by the Monitor. The door bell is now working and was verified by our Monitor at the time of the Exit Conference.

Recommendation:

Casa Esperanza's Management shall ensure:

1. The group home exterior (physical plant) is maintained in good repair.

MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY

Based on our review, Casa Esperanza fully complied with 11 of 13 elements reviewed in the area of Maintenance of Required Documentation and Service Delivery.

One initial NSP was not comprehensive and did not meet all required elements in accordance with the NSP template. The NSP did not include the Psychotropic Medication Authorization (PMA) date and there was no explanation documented in the child's NSP. The Administrator explained that the child was placed at Casa Esperanza with psychotropic medication but without the PMA. Casa Esperanza eventually

obtained the PMA, after the child's initial NSP due date. The Administrator further explained that the date was not included in the NSP because they wanted to ensure the initial NSP was timely. Subsequent NSPs included the PMA date.

One child disclosed that she wanted a mentor, however one was not provided by Casa Esperanza. The Administrator stated that the child never asked Casa Esperanza staff for a mentor and if she had asked one would have been provided. After the Exit Conference, the child's therapist was notified and arranged for the child to have a mentor through another agency with whom Casa Esperanza partners.

Recommendations:

Casa Esperanza's management shall ensure:

2. Comprehensive initial NSPs are developed.
3. Children are assisted in maintaining important relationships.

PERSONAL RIGHTS AND SOCIAL/EMOTIONAL WELL-BEING

Based on our review, Casa Esperanza fully complied with 13 of 15 elements in the area of Personal Rights and Social/Emotional Well-Being.

One of four children interviewed reported that consequences were unfair. She stated that some staff members show favoritism toward some residents. She told the Monitor about an incident involving two girls, whom she referred to as the "favorites" who had run away. She claimed the girls were never disciplined when they returned. For other residents, this would have resulted in the reduction of daily points. The points determine privileges and weekly allowance the children receive.

The Administrator reported to the Monitor that consequences and the guidelines for administering consequences are fair. The DCFS Monitor reviewed Casa Esperanza guidelines on consequences and found them to be fair, and the other children interviewed reported consequences were fair. Nonetheless, this child felt some group home staff members were not fair when administering consequences.

Another child disclosed that she wanted to participate in kickboxing. Casa Esperanza did not provide her the opportunity to participate in age-appropriate extra-curricular, enrichment, and social activities in which she has an interest. The Administrator stated that Casa Esperanza was trying to find kickboxing classes close to the group home with a schedule that did not interfere with the child's mandatory drug treatment schedule. Since the review, the child has been enrolled in her kickboxing classes which she attends four times a week.

Recommendations:

Casa Esperanza's management shall ensure:

4. Consequences are fair for all children.
5. Children are given opportunities to participate in age-appropriate extra-curricular, enrichment, and social activities in which they have an interest.

FOLLOW-UP FROM OHCMD'S PRIOR MONITORING REVIEW

Objective

Determine the status of the recommendations reported in our prior monitoring review.

Verification

We verified whether the outstanding recommendations from our prior review were implemented. The last report was issued July 15, 2011.

Results

The OHCMD's prior monitoring report contained seven outstanding recommendations. Specifically, Casa Esperanza was to ensure the following: the exterior and grounds were well maintained; comprehensive NSPs were developed; contacts with DCFS CSW's were appropriately documented in the NSPs; children were given opportunities to be involved in extra-curricular activities of their choice; dental exams were conducted timely for all the children; all children were provided at least \$50 per month clothing allowance; and all children's ongoing clothing inventories were of adequate quantity.

Based on our follow-up of these recommendations, Casa Esperanza fully implemented four of seven recommendations. Casa Esperanza did not implement the recommendations regarding maintaining the exterior of the group home; the development of comprehensive NSPs; and providing children with opportunities to participate in extra-curricular activities of their choice. Corrective action was requested of Casa Esperanza to further address the recommendations that were not implemented.

Recommendation:

Casa Esperanza's management shall ensure:

6. Full implementation of the outstanding recommendations from the prior monitoring report which are noted in this report as Recommendations 1, 2 and 5.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

A recent fiscal review of Casa Esperanza Group Home has not been posted by the A-C.

CASA ESPERANZA TREATMENT CENTER

1568 McLeod
Pomona, California 91768

Telephone: (909) 620-7543

Fax: (909) 865-3325

Facility Number #197804217

email: etc7@verizon.net

June 7, 2012

Department of Children & Family Svcs.
Patricia Bolanos-Gonzalez
Bureau of Home Care Management Division
9320 Teistar Avenue, Suite 211
El Monte, CA 91731

RE: MONITORING REVIEW FIELD VISIT: March 29-30, 2012
CORRECTIVE ACTION PLAN – Report Findings April 18, 2012

Dear Mrs. Bolanos-Gonzalez:

Casa Esperanza is submitting the following plan of correction for the deficiency findings of the April 18, 2012 Monitoring Review.

II. FACILITY AND ENVIRONMENT

#10 Are the exterior and the grounds of the group home well maintained? (Front and back yards clean and adequately landscaped, condition of home exterior, driveway, walkways and fences; window screens).

The front door bell not working at the time of the facility inspection. Per Group Home Administrator, the door bell was fixed shortly after the review and was verified by the DCFS Monitor at the time of the EXIT. GH also provided receipt of repair of door bell.

Response: The doorbell was replaced promptly after. The invoice you received was dated with the date that the handy man submitted his bill to accounting. The actual repair date was Monday, April 2, 2012. In future, Casa Esperanza will ensure that the doorbell is working. The morning Facility Manager will be designated to call for immediate repairs once they have been brought to our attention.

III. MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICES DELIVERY

#22 Did the treatment team develop comprehensive initial Needs and Services Plans (NSP) for the child?

Response: The group home social worker will ensure that all Needs and Services Plans will be comprehensive and include all required information. If information such as a PMA date is not available the social worker will include in the report the reason for the missing data and the attempts the group home made to collect such data.

“Serving the special needs of children in foster care”

#26 Does the agency assist the children in maintaining important relationships?

At the time of placement, the group home administrator will identify whether the placed child has any connection with a caring adult (not having visits with relatives or a responsible adult) and when important relationships are lacking. Once the need has been identified, the Group Home Social worker will meet with the placed resident in identifying, developing and maintaining important relationships and address the mentorship program available to the child and answer any questions that the child may have. The group home social worker will work collaboratively with the DCFS County Worker in obtaining a mentor for the resident through the county's existing mentoring programs. The group home social worker will assist the placed resident and the County Worker in identifying a caring adult that will help the child prepare for the transition from foster care to independent living. The group home social worker's contact with the CSW will be documented and the plan for mentorship will become a part of the Needs and Service Plan. Casa Esperanza understands that it is not the responsibility of the child to request a mentor. A process has been developed where both the child, administrator and group home social worker initiate the process for (1) identifying the need for support, (2) child's interest in a mentor (3) Meeting between the child and the group home social worker (4) the initial contact date by the group home social and the child's County Social Worker. A child who declines having a mentor will be required to sign that they understand this support is available to them but they are declining at this time. This will be noted on the child's NSP. (See Attachment A)

VII. PERSONAL RIGHTS AND SOCIAL/EMOTIONAL WELL-BEING

#52 Are consequences fair?

Response: The group home has an established points program that governs consequences for inappropriate behaviors. These consequences are fair and appropriate and are applied equally to all clients. Often times, due to confidentiality of the client's individual case plans, consequences may appear to be unfair. For example, one client may not be approved for a community pass for a weekend due to poor behavior. Community passes are in most cases, approved by the CSW and are up to the discretion of the Group Home due to behavior level. On the other hand another client may have court approved visits with a parent/guardian that are court mandated where the group home has no discretion and cannot deny these passes. If the residents got into a fight or got into a week causing them to drop levels, that will prevent them from engaging in outside activities. For one client that is not able to go anywhere will always say or feel that it is not fair if the other resident is able to participate. This is a constant problem where residents may feel that the other resident may feel they are not given the same privileges. What it comes down to is that each child has their own case plan with different provisions and different CSWs who may allow one thing that another CSW may not allow for another. This often depends on the needs of the minor. The weekly points are also reviewed by the administrator. If the resident feels that points or consequences are unfair, they always have the option to discuss this with group home Social worker and administrator before consequences are determined. When the client appeals to the administrator about points that they feel are unfair, they are directed to discuss it with the staff that took off their points in order to resolve this issue. If the staff will not change their decision and the client still feels that they are treated unfairly, the client has the option to meet with the Group Home Administrator. The Administrator will resolve the issue with both the client and staff for final determination.

The resident [REDACTED] reported that consequences are not fair. In reviewing [REDACTED] points records, it was found that since her placement (over 1 year), [REDACTED] has rarely been on a level below B which would allow [REDACTED] to participate in any activity that she is permitted to participate in. [REDACTED] rarely receives consequences as she more often than not participates in the program appropriately. All clients have the right to privacy, therefore consequences are not displayed or broadcasted. The group home social worker and administrator will continue to monitor to ensure that clients are given every opportunity to voice feelings of unfair treatment.

46) Are children given opportunities to participate age-appropriate extra-curricular, enrichment and social activities in which they have an interest?

Response: [REDACTED] is enrolled in and has been participating in Tae Kwon Do for the past month. [REDACTED] expressed interest in joining karate in March. The treatment team felt that for this minor this would be a very appropriate and therapeutic extra curricular activity for the minor's needs. The group home immediately looked into karate classes for the minor. However, it took some time finding a class that would not interfere with all of the other daily group home activities. For example: the minor is enrolled in a drug and alcohol program Tuesday & Thursday evenings from 6:00pm-7:00pm. It would not be in the best interest of the minor to interrupt drug and alcohol treatment for an extra curricular activity. A class was found that allows the minor to attend from 7:30-8:30 4 evenings per week. The minor was enrolled as soon as the group home found an appropriate class that would not interrupt the treatment plan. Group Home Administrator, facility managers and group home social worker will work together to ensure that all clients participate in activities of their choice.

If you have any questions regarding this corrective action plan, please contact me at (626) 311-9085. Casa Esperanza Group Home wishes to comply with the results of our monitoring review.

Sincerely,


Sukhwinder Singh
Executive Director

Attachment (A)

CASA ESPERANZA GROUP HOME
IDENTIFICATION AND DEVELOPMENT OF RELATIONSHIPS

Resident: _____ DOB: _____

DOP: _____

IDENTIFYING NEED FOR SUPPORT

PART I. Initial Placement Assessment:

No Need Identified At This Time

Group Home Administrator's assessment of child's relationships with other responsible adults and relative visits. Date: _____

PART II. Need Identified

Need has been identified. (Complete the following)

1. A meeting was held with the above named child on: _____ regarding the mentorship program. (Meeting between child and GH Social Worker). Initiated by the GH Social Worker.
2. County Social has been contacted regarding this meeting and the outcome. Initiated by the GH Social Worker and recorded on the weekly progress note.
3. Child declines mentorship at this time. (Mentorship support will be discussed with the child each quarter and addressed in the needs and service plan). Initiated by the GH Social Worker. Child also signs the NSP acknowledging refusal of a mentor at this time.

This document will also serve as a checklist of this process and refusal of this support by the child at this time.

DECLINATION:

I decline mentorship at this time. (If at any time, I wish to obtain a mentor, I may do so at any time by informing the Group Home Administrator and GH Social Worker. If I am not provided with a mentor, I may contact the Executive Director at (626) 814-9085.

Resident: _____ Date: _____
Signature Required

GH Administrator: _____ Date: _____

GH Social Worker: _____ Date: _____

Cc: Client's File